

THE LURE OF MEDICAL HISTORY†

HISTORICAL GYNECOLOGY

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EVER since man emerged from out the evolutionary murk of time into the dim, crepuscular foreshadowings of his present form, his young born viviparous and altricial, the females of his species have been subject to all the same affliction as their mates. They have, however, in addition been forced to endure, as part of their sacrifice to the perpetuation of the race, immediate and remote misadventures of their birth tracts.

Practically all those anatomical and pathologic changes with which we are today familiar, barring the ravages of certain infections, existed then as now. Paleopathology has revealed the presence of degenerative diseases which have so often been puritanically relegated to our own sinful era when Bacchus, Vulcan, and Venus were supposed to be the reigning deities, and not in the "good old days," when virtue ruled unspotted and every prospect pleased.

These revelations are somewhat heartening to our pride of progress, rid us of an inferiority complex, and gild our hopes for the future.

EARLIEST WRITTEN RECORDS

In seeking material for some historical notes on ancient gynecology,¹ we must travel back to the sixteenth century, B. C., and examine the pages of the Papyrus Ebers. This papyrus is the oldest work on medicine which we possess, and its pages contain some real facts concerning gynecology; unfortunately the Hermetic Book, somewhat older, which was devoted to the consideration of the diseases of women, was not preserved.

Next we find two Hindu works, the "Charaka Veda" and the "Sushruta Veda," and since some portions date back to beyond 900 B. C., and as they contain passages in great number bearing on the diseases of women, they enable us to see the great antiquity of certain methods and therapeutic agents used in the treatment of gynecological cases at the present time; notably tampons, the cautery, pessaries, and astringent washes.

We then come to the Grecian period and to the genuine works of Hippocrates (460-377 B. C.), which, however, contain little of interest. On the other hand, among the works attributed to Hippocrates, but now considered spurious, we have several treatises on gynecology which contain a surprising number of accurate observations, and convince us that gynecology was a branch of medicine that had received a large share of attention among the Greeks.

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From Greece we travel to Alexandria, third and fourth centuries, B. C.; but time has not preserved for us any of the many treatises which we have reason to believe were written on the diseases of women by those who studied in the schools of the Egyptian Athens.

THE ROMAN PERIOD

In the Roman period, next, the first of the writers was Celsus, 50 B. C. to 7 A. D., who lived in the reigns of Augustus and Tiberius, and who has left us, in his most gracefully written work on medicine, some observations on the anatomy of the uterus, and some descriptions of gynecological operations. Pliny, born in 23 A. D., and who perished in the eruption of Vesuvius, 79 A. D., has recorded, in his encyclopedic work on natural history, many therapeutic agents in use in the treatment of the diseases of women. Soranus of Ephesus, who flourished in the reigns of Trajan and Hadrian, has handed down a most brilliant and interesting work on gynecology and obstetrics; while Rufus, also of Ephesus, has given a catalogue of terms applied to the various parts of female organs of generation.

Traveling down the stream of time, we meet with Aretaeus of the first, and Dioscorides of the first or second century, and we find something of interest relative to gynecology in the works of both these writers. We next come to the illustrious Galen, born 130 A. D., whose monumental labors, however, have not enriched the field of gynecology, although we find among his genuine works an interesting treatise on the dissection of the female genital organs, as well as many observations on the physiology of these parts.

IN THE FAR EAST

Leaving Italy, we turn once more to the East. Under the Byzantine rule we find Oribasius, 326 to 403 A. D., compiling his vast encyclopedia of seventy volumes, from whose pages we are able to glean some facts about our subject. At the same Court, in the sixth century, Aetius composed his medical and surgical treatises in sixteen books (translated into Latin in 1542), the last of which is devoted to the diseases of women. This work is of the greatest importance; for, while it contains much that Soranus has given, it presents at the same time chapters from such authors as Archigenes and Philumenus, whose works have perished forever. We also notice the curious work of Moschion, which is now known to be only an abbreviation of Soranus.

Lastly we come to the seventh century and to the brilliant résumé of ancient medicine contained in the great work of Paulus Aegineta.

THE DARK AGES

Here our labors cease; for with the death of Paul the Dark Ages began, lasting almost 1,500 years, and the gynecology contained in the works of the Arabian authors is only a servile copy from the pages of those who had preceded them.

Hippocrates says that "if the mouth of the womb gapes in a manner contrary to nature, the

menstrual periods become more abundant and viscid, they come on more frequently than normal, and the patient suffers from pain in the lower part of the abdomen and in the loins. The treatment should be by medicated pessaries and astringents."

Soranus states that an erosion which succeeds an ulceration may be the cause of menorrhagia and metrorrhagia.

Aetius tells us that fissures around the mouth of the womb are caused by difficult labors on account of the size of the child's head: in the treatment, be it observed, Aetius says that all surgical interference and medicines of an irritating nature are to be avoided, for such induce inflammation.

The descriptions given us by the author of the Hippocratic works on gynecology, of inflammation of the uterus, refer to both acute and chronic cervicitis and metritis; and the clinical pictures that he draws are most excellent and accurate.

Soranus has given us a most elaborate account of the several symptoms and signs which are to be found following inflammation of the various regions of the uterus and cervix. His descriptions embrace a consideration of parametritis and pelvic abscess. Aetius also deals at length with the same subjects.

It is interesting beyond measure that Hippocrates, Aetius, and Oribasius all mention the various degrees of cancer of the womb, stating that, when advanced, the disease is incurable. Hippocrates mentions its (*cancer's*) possible relationship to chronic irritation, yet he warns the surgeon against interference in a case of "*malignant thymus*," and "*malignant polypus*," of the womb; but Oribasius advises the use of the cautery in case of malignant thymus. He it was (325 A. D.), after making some lengthy remarks about the cervix uteri, who says that hardness of the cervix is a symptom of three different conditions: dryness, inflammation and scirrhus of the womb, the last of which, from his description, almost certainly includes carcinoma in some form.

GNORRHEA

The period at which gonorrhea first attacked the human race is not known. But since we recognize what an enormous factor this affection plays in the etiology of the diseases of women, it is necessary to examine those passages in ancient writers which apparently refer to the disease; for if gonorrhea then existed—and we believe that it did—the women in the past must have suffered, for certain, as the result of this disease, all those complications, such as tubal disease and acute metritis, with which we are familiar at the present day.

Moses, in the fifteenth chapter of Leviticus, says: "When a man hath a running issue out of his flesh, because of his issue he is unclean" (Verse 2). The septuagint version renders "Hazzab," the man with the issue, by ὁ γονορροῖς the man with a gonorrhea: with regard to the term ὁ γονορροῖς, we find this term was used by Rufus, Aetius, and

Paulus to express a condition of spermatorrhea, not of gonorrhea, as we now understand the term; and Galen ("de Locis Affect" Vi, 6) says that gonorrhea is an involuntary excretion of sperm and is derived from γονέ seed, and ρέω, to run. But Moses does not mean that the issue mentioned in verse 2, is spermatorrhea, because that affection is mentioned in verse 16, and verse 32 says: "This is the law of him that hath an issue, and of him whose seed goeth from him, and he is defiled therewith."

In Deuteronomy (xxiv 1) it is stated that if a man should marry a woman, "and it come to pass that she find no favor in his eyes, because he hath found some uncleanness in her, let him write her a bill of divorcement."

Now if gonorrhea existed (and we have said above we have every good reason to prove that it did) it follows naturally that Bartholinian gland abscesses existed, as did also vaginitis, cervicitis, salpingitis, endometritis, and pyo-salpinx. There can be little doubt that some of these diseases were treated, and it is probable that the priest-physicians, if they lacked gynecological material from the modesty of the Egyptian women (though the revels of the feast of Bubastis in later years show us little modesty), could have obtained plenty of subjects among the prostitutes of the times, who were then a semireligious cult often sequestered in the temples, and would naturally be desirous of being cured of their complaints.

Halban² gives an account of the knowledge of gonorrhea and infections of the uterus and cervix among the ancient Jews.

Among the Romans, women who could not have intercourse, either on account of the menses or on account of disease of the genitals, were termed "*ancunulenta*," from "*cunus*," the vagina; and these prayed to Juno Fluonia, and were accustomed to use the "*aster atticus*." This plant is mentioned by Pliny as being a sovereign remedy for diseases of the groin. The Greeks termed it "*Bubonion*," while the Romans called it "*Bubonium*," and the word came to be used and applied to the disease for which it was given, whether in the case of male or female; this is the origin of our term, "*bubo*." The Romans said of a female, who communicated a disease to a man, "*Haec te imbubinat*." Strangely enough, among the Romans venereal disease did not appear to be so prevalent among prostitutes as among others. Parenthetically, Roman prostitutes were supposed to wear "*yellow wigs*," a possible origin for the color of the Board of Health flag, and an explanation as to "*Why gentlemen prefer blondes!*"

Roman doctors declined to treat "*secret diseases*," and, therefore, the rich were treated by their own slave doctors, while the poor were driven into seclusion; a custom, in fact, that prevailed among the children of Israel, who "were to put out of the camp every leper, and everyone that hath an issue." In 1497, James IV of Scotland, in consequence of the frightful prevalence of the venereal diseases in Edinburgh, issued the celebrated proclamation banishing the infected from

the city. But it is probable that if the Roman doctors may have declined to attend patients afflicted with venereal diseases, the "archiatri," who acted somewhat after the fashion of the dispensary surgeon of the present day, treated those diseases embraced under the generic term, "morbus indecens," inasmuch as they were bound to treat the poor gratuitously, though they might charge the rich.

At subsequent periods this disease, gonorrhea, in men and women, and in many instances its complications of swelled testicle and cystitis were described with more or less detail by Mesus (904); by Ali Abbas, one of the Persian Magi (980); by Rhazes (852), and by Albaculis and others.

McKay states in conclusion: "Since writing the résumé on gonorrhea, we have been able to consult the Jerusalem Talmud, and the frequent references therein to gonorrhea confirms us in the opinion that this disease played an important part in the etiology of the diseases of women in ancient times."

Dr. Henry Harris of San Francisco has kindly called my attention to the fact that similar deductions may also be made from a study of passages in the Jewish Torah.

COMMENT

During the first two hundred years of the Byzantine period Pliny, Celsus, Dioscorides, Soranus, Caelius Aurelianus, Aertaeus, and Galen lived and wrote, and while the Roman power was at its zenith, during the Augustan period. Yet slowly and inevitably the power of Rome had begun to decline toward its nadir; and though the works of Galen represent the highest point to which medical science attained in ancient times, yet after his death (A. D. 200) we have a fall so abrupt that we may say without exaggeration that the works we encounter for the next more than fifteen hundred years are but shadows of those written by Galen and his predecessors, and show, in their language, as in their subject-matter, the rapid decline of intellectual vigor and original research.

From these early times through the more than ten slumberous centuries of darkness in all human progress, when arm-chair philosophy and disputative dialectics reigned in place of observation and experimentation, we at last reach the beginnings of the nineteenth century with but little change and no advance. Then, gradually, we commence to note the adumbrations of efforts and works dealing with inflammation of the uterus and generative organs.

BENNETT'S WORK

In 1842 appeared a charming, simple, naïve and altogether delightful volume, entitled "A Practical Treatise on the Inflammation of the Uterus, Its Cervix and Appendages and on Its Connexion with Internal Diseases" by John Henry Bennett, M. D., London.

Its deliberate sentences, orotund phraseology and cultured periods, remind us most forcibly of the classically educated and dignified country bedside practitioner of an older age. Among many other headings the author has gathered together,

somewhat oracularly, the extant practical knowledge of what was known at the time as "cervical fungous endometritis."

The venerable doctor whose aegis of success was the relief of human suffering, and surcease from pain, began upon a somewhat false premise of anatomical lack of knowledge, and built up a bit didactically his thesis of the pathology and treatment of cervicitis; accepting what he thought was of value from the ancients, discarding what appeared to him as valueless, and leavened it with his own observation and experience. Though we may smile somewhat patronizingly from the Parnassian heights of our questionably superior intelligence, he has made a convincingly practical and excellent job of it.

"The presence of cellular tissue in the cervix," he says, "its greater vascularity as compared with the uterus, and the highly developed state of the mucous membrane lining it, are, in a pathological point of view, the most important anatomical peculiarities which it presents; generally speaking, both the mucous follicles and the vascular mucous network are simultaneously the seat of inflammation. The causes which give rise to inflammation of the cervix may be divided into 'predisposing and efficient.'"

He mentions that pains in the lower part of the back, in the hips and thighs, are also generally mistaken for indications of constitutional weakness. Thus, our Nestorian gynecologist proceeds through "Errors in Diagnosis," "Inflammation and Ulceration in the Virgin," "During Pregnancy," "Neck of the Uterus in Advanced Life," and so on; yet, despite what we know existed in the observations recorded in books which antedated him by centuries, we find practically no mention of gonorrhea; no evidence of microscopic examinations, and with no conception, even, to approach those of the ancient Rabbins in regard to septic invaders, nor of the relationship of chronic inflammation to malignancy; yet, and withal, as far as it goes, it is an excellent guide to the practical gynecology, its régime and treatment, of his years.

"The secretion of the ulcerated surfaces, wherever its seat, is necessarily purulent. The pus may be thick and 'of a healthy yellow color' (Laudable pus), or it may be thin, sanious or ichorous according to the state of the ulceration."

Doctor Bennett may be taken as the altogether admirable prototype of the better class gynecologist of his time. Despite their histological, bacteriological and pathological ignorance, these old gentlemen were well informed in a modern sense regarding the pains, disabilities, and available methods of practical treatment, the whole being complemented by a profound psychological knowledge of human nature.

"The pain occasioned by inflammation and ulceration of the uterine neck is seldom found behind the pubis, the anatomical seat of the diseased cervix, but in one or both of the ovarian regions, in the lower lumbar and upper sacral region. The uninterrupted persistence of one or all of these pains—is an important feature of their character."

After an exposition of local antiphlogistic measures, such as heat, hot milk and carbolyzed water injections, silver nitrate placed in the cervical canal, alum insufflations and other astringent washes of an almost inquisitorial nature, he concludes hopefully and benignly, "inflammatory ulceration of the cervix uteri, not being, *per se*, a fatal disease."

These men antedated by some decades the modern throes of gynecological rebirth, yet their case records demonstrate a pleasing number of probable cures, and a large number of relieved patients, for whom life was made more endurable; and more pleasing still, they were the recipients of vastly more gratitude and appreciative recognition than obtains in this age of hypersophistication.

THE MODERN PERIOD

Now the flickering torch of revived knowledge in the modern phases of gynecology began to gleam. Lawson Tait, Sims, McDowell, and illustrious others, all infused increased energy into the shedding of light, and then Howard Kelly, in this country, gave it its greatest encouragement, impetus, and brilliance.

It is interesting and thought-provoking to observe that from even the earliest times down to our own, there appear to be cyclical swingings to and fro, hand in hand with all the succeeding advances in medical, chemical and biological science; now to that side which advocates the complete destruction and extirpation of tissue and its contained noxa, regardless of fact or function, then to the side of the chemical disinfectants directed chiefly against the bacterium itself. Then, ever and anon, "the still small voice" gains volume through the incisive, reverberations of surgical and semi-surgical argument, pleading, "Hold! why not give the tissues themselves a chance? Surely, Mother Nature, if relieved of some overburden and her intrinsic reparative ability abetted, can carry on." For a while the more moderate methods tending to increase local tissue resistance, rather than mutilative ablations, prevail; then, behold, some new, supposedly powerful germicide is "hozzanaed" forth under the all-puissant trade-mark of some grandiose pharmaceutical house, garnished in the flamboyant banners and gaudy clamant fustian of intemperate advertising; poor critique, combined with exaggerated claims of what it can do *in vitro*, presented in pseudoscientific reports, and the whole "devil's dance" whirls on again until the next generation, perhaps, fortified and informed by experimentation, tragic failures and numerous reliable clinical reports decides again for "common sense."

IN CONCLUSION

An historical and philosophical purview of this subject, similar to that of any other of life's activities, is always intriguing and enlightening. In the illumination of our present attitude, modern *modi operandi*, and following intimately the dictum of Huxley, "that science is organized common sense," leavened with knowledge, it is noteworthy and arresting that the same "natural" methods that we use today—heat, hyperemia, astringent applica-

tions, posture, hygiene, packs, pessaries, etc., were in use in the dim vistas of the Babylonian desert and on the uptilted escarpments of the Oxus River when civilization was germinating; and that when these men, too, used extreme measures their practice, in keeping with their more heroic age, was, perhaps, more drastic in degree but differing not at all in kind from ours.

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REFERENCES

1. McKay: History of Ancient Gynecology, London, 1901.
2. Halban: Biologie und Pathologie des Weibes, Vol. 1, "Juden," p. 14, 1924.

CLINICAL NOTES AND CASE REPORTS

BREAST SUPPORT

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AN ideal breast binder would hold the breasts in the position which is normal in lower animals. In prehistoric days, when the human race walked on all-fours, breast binders were not needed. Now, because of the upright posture, the breasts drop against the chest, so that milk flow and lymph drainage are interrupted.

For years physicians have recognized the necessity for a breast support, especially during the period after childbirth, when breasts are engorged and painful, and secretion of milk begins.

The first breast binders were merely strips of cloth pinned around the chest, pressing on the breasts, interfering with axillary lymph drainage. Later, binders were shaped to the body more or less, but the first really satisfactory breast support was described in 1919 by Dr. Alfred C. Beck.¹ This binder originally consisted of a piece of old sheet about eighteen inches wide and fifty-four inches long. The middle portion covered the patient's back, and each end was brought across the breast of one side and over the opposite shoulder, where it was pinned to the top of the back portion of the cloth. A towel was used as a pad. The flaps were pinned together in front at top and bottom. This binder lifted the breasts

¹ Medical Times, 1919.

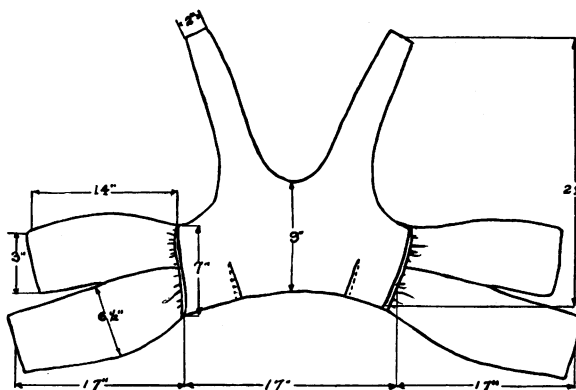


Fig. 1.—The binder with dimensions.